MENOMONEE FALLS HEALTH CARE CENTER

N84 W17049 MENOMONEE AVENUE

MENOMONEE FALLS 53051 Phone: (262) 255-1180		Ownership:	Corporation
Operated from 1/1 To 12/31 Days of Operation:	365	Highest Level License:	Skilled
Operate in Conjunction with Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds Set Up and Staffed (12/31/05):	78	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Capacity (12/31/05):	78	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12/31/05:	70	Average Daily Census:	76

Age, Gender, and Primary Diagnosis	of Residents (12/	31/05)		Length of Stay (12/31/05)	%
Primary Diagnosis	8	Age Groups 	*	   Less Than 1 Year   1 - 4 Years	42.9 37.1
Developmental Disabilities	0.0	Under 65	17.1	More Than 4 Years	20.0
Mental Illness (Org./Psy)	8.6	65 - 74	7.1		
Mental Illness (Other)	1.4	75 - 84	32.9		100.0
Alcohol & Other Drug Abuse	0.0	85 - 94	38.6		
Para-, Quadra-, Hemiplegic	0.0	95 & Over	4.3	Full-Time Equivalent	
Cancer	4.3			Nursing Staff per 100 Resid	lents
Fractures	8.6		100.0	(12/31/05)	
Cardiovascular	17.1	65 & Over	82.9		
Cerebrovascular	14.3			RNs	10.8
Diabetes	4.3	Gender	%	LPNs	14.4
Respiratory	2.9			Nursing Assistants,	
Other Medical Conditions	38.6	Male	32.9	Aides, & Orderlies	52.6
		Female	67.1	İ	
	100.0	İ			
			100.0	İ	

## Method of Reimbursement

	Medicare Medicaid (Title 18) (Title 19)			Other				Private Pay		Family Care			Managed Care							
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	4	9.1	153	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	4	5.7
Skilled Care	16	100.0	335	39	88.6	131	0	0.0	0	4	100.0	219	0	0.0	0	6	100.0	335	65	92.9
Intermediate				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care				1	2.3	95	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.4
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Ir	ıi O	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	_	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	16	100.0		44	100.0		0	0.0		4	100.0		0	0.0		6	100.0		70	100.0

MENOMONEE FALLS HEALTH CARE CENTER

Admissions, Discharges, and		Percent Distribution	n of Residents'	Condit	ions, Services, and	d Activities as of 12/	31/05					
Deaths During Reporting Period												
					% Needing		Total					
Percent Admissions from:		Activities of	%	As	sistance of	% Totally	Number of					
Private Home/No Home Health	1.2	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents					
Private Home/With Home Health	0.0	Bathing	0.0		95.7	4.3	70					
Other Nursing Homes	0.0	Dressing	1.4		94.3	4.3	70					
Acute Care Hospitals	98.8	Transferring	8.6		87.1	4.3	70					
Psych. HospMR/DD Facilities	0.0	Toilet Use	8.6		87.1	4.3	70					
Rehabilitation Hospitals	0.0	Eating	78.6		17.1	4.3	70					
Other Locations	0.0	******	******	*****	*****	******	*****					
Total Number of Admissions	166	Continence		용	Special Treatmen	ts	%					
Percent Discharges To:		Indwelling Or Extern	nal Catheter	10.0	Receiving Resp	iratory Care	18.6					
Private Home/No Home Health	41.5	Occ/Freq. Incontine	nt of Bladder	48.6	Receiving Trac	heostomy Care	2.9					
Private Home/With Home Health	0.0	Occ/Freq. Incontine	nt of Bowel	37.1	Receiving Suct	ioning	1.4					
Other Nursing Homes	13.3	į			Receiving Osto	my Care	5.7					
Acute Care Hospitals	21.5	Mobility			Receiving Tube	Feeding	4.3					
Psych. HospMR/DD Facilities	0.0	Physically Restrain	ed	0.0	Receiving Mech	anically Altered Diets	22.9					
Rehabilitation Hospitals	0.0	į -			_	-						
Other Locations	1.0	Skin Care			Other Resident C	haracteristics						
Deaths	22.6	With Pressure Sores		18.6	Have Advance D	irectives	98.6					
Total Number of Discharges		With Rashes		0.0	Medications							
(Including Deaths)	195				Receiving Psyc	hoactive Drugs	61.4					

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

**************	******	*****	******	*****	*****	*****	*****	*****	*****
		Owne	ership:	Bed	Size:	Lic	ensure:		
	This	Pro	prietary	50	-99	Ski	lled	Al	1
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities
	%	% % Ratio		% Ratio		% Ratio		%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	89.9	85.1	1.06	87.0	1.03	86.5	1.04	88.1	1.02
Current Residents from In-County	60.0	82.7	0.73	84.6	0.71	84.9	0.71	77.6	0.77
Admissions from In-County, Still Residing	10.8	15.8	0.69	16.8	0.65	17.5	0.62	18.1	0.60
Admissions/Average Daily Census	218.4	247.5	0.88	240.5	0.91	200.9	1.09	162.3	1.35
Discharges/Average Daily Census	256.6	250.7	1.02	242.6	1.06	204.0	1.26	165.1	1.55
Discharges To Private Residence/Average Daily Census	106.6	109.5	0.97	104.8	1.02	86.7	1.23	74.8	1.42
Residents Receiving Skilled Care	98.6	96.3	1.02	97.6	1.01	96.9	1.02	92.1	1.07
Residents Aged 65 and Older	82.9	84.6	0.98	92.0	0.90	90.9	0.91	88.4	0.94
Title 19 (Medicaid) Funded Residents	62.9	59.3	1.06	46.7	1.35	55.0	1.14	65.3	0.96
Private Pay Funded Residents	5.7	13.3	0.43	27.5	0.21	22.5	0.25	20.2	0.28
Developmentally Disabled Residents	0.0	1.9	0.00	1.3	0.00	1.1	0.00	5.0	0.00
Mentally Ill Residents	10.0	29.4	0.34	31.8	0.31	31.0	0.32	32.9	0.30
General Medical Service Residents	38.6	26.5	1.45	24.5	1.57	26.5	1.45	22.8	1.69
Impaired ADL (Mean)	42.9	53.7	0.80	50.6	0.85	52.3	0.82	49.2	0.87
Psychological Problems	61.4	53.4	1.15	61.3	1.00	58.3	1.05	58.5	1.05
Nursing Care Required (Mean)	9.3	7.7	1.21	7.5	1.24	7.3	1.27	7.4	1.25